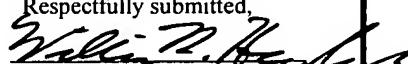


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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	MDS-034DV
	First Named Inventor	Schomacker
	Title	Optimal Windows for Obtaining Optical Data for Characterization of Tissue Samples

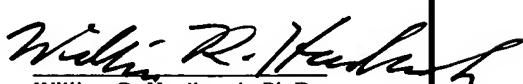
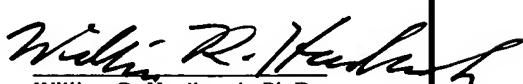
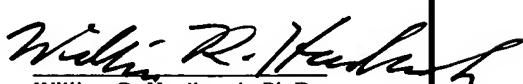
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<u>APPLICATION ELEMENTS</u>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input checked="" type="checkbox"/> Small Entity Status <input type="checkbox"/> Applicant claims small entity status <input checked="" type="checkbox"/> Status established in prior application and is still proper and desired		<u>ACCOMPANYING APPLICATION PARTS</u>
3. <input checked="" type="checkbox"/> Specification and Drawings [Total Pages 63] - Written Description - (37 pages) - Claims - (8 pages) - Abstract - (1 page) - Sheets of Drawings - (17 sheets) <input checked="" type="checkbox"/> Formal <input type="checkbox"/> Informal		
4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 4] a. <input type="checkbox"/> Newly executed (original) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 below]</i>		8. <input type="checkbox"/> 37 CFR 3.73(b) Statement ( <i>when there is an assignee</i> ) <input type="checkbox"/> Power of Attorney  9. <input type="checkbox"/> English Translation Document ( <i>if applicable</i> )  10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
5. <input checked="" type="checkbox"/> Incorporation by Reference (usable if Box 4b is checked) The entire Disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		11. <input checked="" type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Drawings [Total Sheets ]
6. <input checked="" type="checkbox"/> Application Data Sheet 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <input type="checkbox"/> Computer Readable Form (CRF) <input type="checkbox"/> Paper Copy (identical to computer copy) <input type="checkbox"/> CD (2 copies) (identical to computer copy) <input type="checkbox"/> Statement verifying identity of above copies		12. <input checked="" type="checkbox"/> Return Receipt Postcard ( <i>specifically itemized</i> )  13. <input type="checkbox"/> Certified Copy of Priority Document(s) ( <i>if foreign priority claimed</i> )  14. <input type="checkbox"/> Nonpublication Request Under 35 U.S.C. 122(b)  15. <input type="checkbox"/> CD in duplicate for large table or computer program 16. <input checked="" type="checkbox"/> Other: <ul style="list-style-type: none"> <li>• Copy of Fee Transmittal</li> <li>• Check in the amount of \$394.00</li> </ul>
17. <input type="checkbox"/> If a CONTINUING APPLICATION: Amend the specification by inserting on page 1, before the first line, the sentence: --This is a <input type="checkbox"/> continuation <input checked="" type="checkbox"/> divisional <input type="checkbox"/> continuation-in-part of prior application Serial No. 10/295,794, filed on November 15, 2002, the entire disclosure of which is incorporated by reference herein.-- <b>Priority to the above application(s) is claimed under 35 U.S.C. 120.</b> Prior application information: Examiner: S.P. Siefke, Group/Art Unit: 1743.		
18. <input type="checkbox"/> Priority - 35 U.S.C. 119 <input type="checkbox"/> Priority of application Serial No. _____ filed on _____ in _____ is claimed under 35 U.S.C. 119. <input type="checkbox"/> The certified copy has been filed in prior U.S. application Serial No. _____/_____ on _____. <input type="checkbox"/> The certified copy will follow.		
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100 Customer No. 021323		Respectfully submitted,  William R. Haulbrook, Ph.D. Attorney for Applicant(s) Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110

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**FEE TRANSMITTAL**  
**FY 2004**

<i>Complete if Known</i>	
Application Serial Number	Not yet assigned
Filing Date	Herewith
First Named Inventor	Schomacker
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket No.	MDS-034DV

<b>METHOD OF PAYMENT</b>		<b>FEE CALCULATION (continued)</b>																																																																																								
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Large Entity</th> <th style="text-align: center;">Small Entity</th> <th></th> </tr> <tr> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Description</th> <th style="text-align: center;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>420</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>950</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1480</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>2010</td><td>1005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>330</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>330</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>290</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>770</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>770</td><td>385</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td>110</td><td>55</td><td>Submission of Terminal Disclaimer</td><td></td></tr> <tr> <td colspan="4">Other fee (Specify)</td> </tr> <tr> <td colspan="4">Other fee (Specify)</td> </tr> </tbody> </table>		Large Entity	Small Entity		Fee (\$)	Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		420	210	Extension for reply within second month		950	475	Extension for reply within third month		1480	740	Extension for reply within fourth month		2010	1005	Extension for reply within fifth month		330	165	Notice of Appeal		330	165	Filing a brief in support of an appeal		290	145	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		770	385	Filing a submission after final rejection (37 CFR 1.129(a))		770	385	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		110	55	Submission of Terminal Disclaimer		Other fee (Specify)				Other fee (Specify)			
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.																																																																																										
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